THE EIGHT, INC.
Monetary/ In-Kind Pledge/Receipt

Instructions: Complete form as service is rendered or donation received.

Name of Donor:		
Address:		
Contact Person:	**Title:**	
Authorized (*Donor*) Signature:		**Date:**
Phone:	**Fax:**	**E-mail Address:**

Program/Purpose *(Identify Program for which service/donation is being utilized)* ☐ **THE EIGHT Programs General**

☑ **Event Title:** MATERNAL WELLNESS SYMPOSIUM (MWS) **Date (s)** FEBRUARY 2. 2019

Riviera Palm Springs/Eldorado Ballroom- 1600 N. Indian Canyon Dr, Palm Springs, CA 92262. 1:00 PM-5:00 PM

DONATION	VALUE
Monetary Donation *Make Check Donation Payable to THE EIGHT, Inc.* *78365 Hwy 111, Suite 208, La Quinta, CA 92253* *For Credit/Debit go to theeight.org, & select "DONATE" Button.*	☐ **Check/Money Order or** ☐ **Credit/Debit** **Date(s) Provided:** ☐ **One-Time Gift** ☐ **Monthly** ☐ **Bi-Annual** **Total Monetary Donation: $** _____
In-Kind Donation- *Please Itemize In-Kind Donations.*	☐ **Service or** ☐ **Goods** **Date(s) Provided:** ☐ **Quantity:** _____ **item 1** ☐ **Quantity:** _____ **item 2** ☐ **Quantity:** _____ **item 3** **Total Fair Market Value: $**

Received By THE EIGHT: (*Authorized Signature*)	**Title:**
Name: (*Please Print*):	**Date:**

On Behalf of
THE EIGHT, INC. 501 (C)(3)
Mailing Address
78365 Hwy 111, Suite 208, La Quinta, CA 92253

Website: http://theeight.org/Email: admin@theeight.org P: 760-618-1528 F: 888-783-7618